Copper Intrauterine Device (IUD) FACT SHEET

The copper IUD is a small, T-shaped device of soft plastic and copper that is placed in the uterus. The copper IUD, also known as ParaGard® has copper and does not have any hormones. IUD’s prevent sperm from joining with an egg. The IUD is one of the most effective forms of contraception, more than 99% effective.

- IUD’s are inserted after a pelvic exam. Your clinician will place a speculum and steady your cervix with an instrument. The IUD will be placed through the opening in your cervix into the uterus. You may feel cramping during the procedure. A short length of plastic “string” will hang down inside your vagina. You can check the string to make sure the IUD is still in place.
- The IUD does not protect against sexually transmitted infections (STIs). Condoms are the best way for sexually active people to reduce the risk of infection. Always use a condom to prevent STIs.

Advantages of the copper IUD:
- Highly effective reversible birth control
- Works immediately upon insertion
- Can be used while breastfeeding
- Nothing to do right before sex to make it work
- Ability to become pregnant should return quickly when removed
- No hormones
- Approved for 10 years and may be effective for longer
- Can use for emergency contraception

Disadvantages of the IUD:
- Possible side-effects that may improve over the first 3 to 6 months
  - Heavier, longer periods or increased menstrual cramps
  - Cramping or backache
  - Irregular periods or spotting between periods

Risks of using the IUD:
- Perforation – Very rarely, the IUD is pushed into and through the wall of the uterus during insertion. This is called perforation. It could damage your internal organs. Sometimes surgery is needed to remove the IUD.
- Expulsion – Occasionally, the IUD will partly or completely slip out of the uterus. This is called expulsion. You can become pregnant if it happens.
- Pregnancy – The chance that a pregnancy will happen is very small. If it does, there is an increased risk of serious, problems including ectopic (tubal) pregnancy, infection, miscarriage, and early labor and delivery. We recommend immediate evaluation and removal of the IUD if this happens.
- Infection – PID (pelvic inflammatory disease) associated with using an IUD is rare. PID may lead to sterility. Most PID related to IUD use occurs within three weeks of insertion.
The copper IUD cannot be used by women who:
- Are, or think they are, pregnant
- Currently have or have had any pelvic infection with the past three months
- Currently have signs of a cervical infection or have a known infection such as gonorrhea or chlamydia
- Have cervical or uterine cancer that hasn’t been treated
- Have certain abnormalities of the uterus
- Have abnormal vaginal bleeding that has not been evaluated
- Have, or may have, an allergy to copper or have Wilson’s Disease

Tell your clinician if you have any of these risk factors or conditions or any other past or current medical problems or concerns. Your clinician will examine you and evaluate your risks – including your risk for STIs – and will help you decide if the IUD is right for you. Sometimes special test or follow up may be needed.

Warning Signs – Call your healthcare provider right away if you:
- Notice any change in the length of the string or can feel part of the IUD or think your IUD might have fallen out
- Think you are pregnant
- Have unusual pelvic pain in your abdomen
- Have been, or might have been, exposed to an STI
- Have unusual vaginal discharge
- Have unexplained fever or chills
- Have unusually heavy bleeding from the vagina

Regular physical examinations for routine health care, STI and cancer screening are strongly recommended.